## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10807643

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
	·		(Column 1)		(Column 2)		,	TYPE		OR	SMÅLL	LL ENTITY	
TOTAL CLAIMS			21		•		[	RATE	FEE	]	RATE	. FEE	
FC	OR	·	NUMBER FILED		NUME	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	Triinus 20=		•	2		X\$ 9=	13	OR	X\$18=		
INI	DEPENDENT C	LAIMS	2 mi	nus 3 =				X43=		OR	X86=		
М	JLTIPLE DEPE	NDENT CLAIM P					+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	403	OR	TOTAL		
CLAIMS AS AMENDED - PART II									· ( * 5'	•	OTHER	THAN	
		(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	01.4114		lſ	X43=		OR	X86=		
L	FIRST PRESE	ENTATION OF MI	JUIPLE DEF	ENUENI	CLAIM		י ן	+145=		OR	+290=		
	,				•		L	TOTAL		OB I	TOTAL		
		(Column 1)	•	(Colum		(Column 3)	A	DDIT. FEE		J <b>O</b>	ADDIT. FEE	•	
_		CLAIMS		HIGH	ST		lr	<del></del> 1	ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	-	
	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
		,		,			L	TOTAL		OR	TOTAL ADDIT. FEE		
ADDIT. FEE													
AMENDMENT C		CLAIMS REMAINING AFTER	·	HIGHE NUMB PREVIO	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TONAL	•	RATE	ADDI- TIONAL	
	Total	*	Minus	PAID F	OH	=	┟┝	X\$ 9=	FEE		X\$18=	FEE	
	Independent	<b>*</b>	Minus	***		=	-	X43=	_	OR	X86=		
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A43=		OR			
		4 1-1 4' 2						+145=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL DDIT. FEE		
. 1	t the "Highest Nu The "Highest Num	mber Previously Pa iber Previously Paid	id For" (Total or	SPACE is Independe	iess thai nt) is the	n 3, enter "3." highest number			opriate box	in colu	ımn 1.		